Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless & displays a yeld OMB pontrol number. Application or Docker Humber Substitute for Form PTO-875 Effective December 8, 2004 APPLICATION AS FILED - PART I (Column 1) (Column 2) SMALL ENTITY OTHER THAN OR SMALL ENTITY FOR NUMBER FILED NUMBÉR EXTRA BASIC FEE DI GER 1.16(1), (b), or (c)) RATE FEE (1) NA RATE (1) NIA FEE (1) NA SEARCH FEE 150.00 (27 CFR 1 16(1), (1), or (m)) NA 300.00 · N/A NA NA \$250 **EXMINATION FEE** (1) CFR 1.16(0), (p), or (q)) NIA N/A \$500 NIA NA TOTAL CLAMS \$100 NIA. \$200 PI OFR 1.16(1) minus 20 * X\$ 25 HOEPENDENT CLAIMS X\$50 OR (37 CFR 1.16(N) minus 3. e X100 If the specification and drawings exceed 100 X200 APPLICATION SIZE sheets of paper, the application size fee due FEE (37 CFR 1.16(6)) is \$250 (\$125 for small entity) for each additional 50 sheets or traction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(D) +180= +360± "If the difference in column 1 in less than zero, enter "O" in column 2. TOTAL APPLICATION AS AMENDED - PART II TOTAL (Column 1) (Column 2) (Catumn 3) OTHER THAN OR SMALL ENTITY CLAIMS HIGHEST REMAINING SMALL ENTITY ENDMENTA NUMBER PRESENT: AFTER RATE (\$) PREVIOUSLY ADDI-EXTRA MENDMENT RATE (\$) Total profe titell PAID FOR TIONAL. -ADOL FEE (\$) Minus TIONAL FEE (f) Independent PICFR 1.146H X\$ 25 X\$50 Minus. OR X100 Application Size Fee (37 CFR 1.16(s)) X200 OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.140) +1.80= -OR +360= TOTAL TOTAL ADD'L FEE OR (Column 1) ADD'L FEE (Column 2) (Column 3) CLAIMS REMAINING HIGHEST NUMBER PRESENT AFTER RATE (\$) **PREVIOUSLY** ADDI-EXTRA RATE (\$) AMENDMENT ADDI-TIONAL PAID FOR TIONAL Total CIT CFR L10(1) Minus. FEE (1) FEE (T) X\$ 25 Independent Profe Light Minus X\$50 **OR** . . 2 X100 Application Size Fee (37 CFR 1.16(s)) X200 OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1,160) +180= +360= OR

If the entry in column 1 is less than the entry in column 2, write "O" in column 3.

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If the Highest Number Previously Paid For IN THIS SPACE is less than 20, enter "20".

If the Highest Number Previously Paid For IN THIS SPACE is less than 3, enter "3".

If the Highest Number Previously Peld For IN THIS SPACE is less than 3, enter "3".

The Highest Number Previously Peld For (Total or Independent) is the highest number found in the appropriate box in column 1.

Security of the Highest Number Previously Peld For (Total or Independent) is the highest number found in the appropriate box in column 1.

PTO to process) an application. Confidentiality is governed by 35 U.S.O. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete amount of the you require to complete application form to the USPTO. There will very depending upon the individual case. Any comments the amount of three you require to complete like form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patient Trademark Office. U.S. Department of Commerce. P.O. Box 1450. Alexandria. VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS. TO THE I Trademark Office, U.S. Depertment of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS DRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

TOTAL.

ADD'L FEE

TOTAL

ADD'L FEE

OR